## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003

09/810005

Enective October 1, 2003								04/8/10002					
_		CLAIMS A	AS FILED (Colur			ian 2)	SMALI TYPE	ENTI	ΓÝ	OR	OTHER		
TOTAL CLAIMS							RAT	Ē F	EE	1 1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	EE 36	5.00	OB	BASIC FEE	770.00	
Т	OTAL CHARGE	minus 20=				XS 9			OR	XS18=			
IN	DEPENDENT (	minus 3 =				X43:	+			X86=			
М	JLTIPLE DEPE	RESENT			$\neg \neg$	1			OR	A00-			
• 1	the differenc	e in column 1 is	foes than	zero, onto:	0.00	only many 2	+145			OR	+290=		
*If the difference in column 1 is tess than zero, enter  CLAIMS AS AMENDED - PART						JOIGHIN 2	TOTA	- L		OR	TOTAL	L	
	,	Column 11	AMENDE	(Column 2) Column 3)				L ENT	ITY	OH:	OTHER SMALL I		
AMENDMENT K		HEMAINING AFTER AMENDMENT		tigan Siyasi Tigan	ien Doll	110 (8.14) Č=180	BATE	DC	FIL NAL EE		BALE	FEE	
NDN	Total	. 54	Minus	5	4		XS 9.			OR	X\$18≈		
AME	Independent	. (0	Minus	1	1		X40	$\downarrow$		OR	X86=		
Ľ	FIRST PRESI	ENTATION OF M	ULTIPLE DI	PENDENT	CLAIM		F145	+	V		+290≈		
							ADDIT F	At,		OR,	TOUR ADDIT FEE		
		(Column 1)		(Colun		(Cotumn 3)				٠,			
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID I	BER RUSI -	PRESENT EXTRA	RATE		NAL EE		RATE.	ADDI- TIONAL FEE	
	Totai		Murus				45.5			OR	XS18=		
	Independent		Minus			=	X-13:	1		OB	X86=		
	FIRST PRESE	ENTATION OF MI	ULTIPLE DE	PENDENT	CLAIM		+145	1		OR	+290=	<u>'</u>	
							1007	- I	$\dashv$	-: L	TOTAL	<u>`</u>	
		(Column 1)		(Colun	ın 21	(Column 3)	ADDIT F			· · ·	YOUR LEE	L	
MEN	`	CLAIMS REMAINING AFTER AMENDMENT	-	PREVIO PAID F	S1 BER USLY	PRESENT EXTRA	RATE		IDI- NAL EE		RATE	-ADDI- TIONAL FEE	
	Total	. A.	Minus			-	X\$ 9=			or	X\$18=		
	Independent	•	Minus	***		=	X43=	1			X86≈	<b>-</b>	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-	$\dashv$	OR			
• 11	the entry in colu	rnn 1 is less than th	ne enter in col	huma 2ita	70° in and		+145≃			OR	+290=		
11	the Highest Nu	mber Previously Pa mber Previously Pa	ud For IN TH	IIS SPACE is	face tha	n 20 enter "20 "	ADDIT. FE			or ,	TOTAL ODIT FEE	L	
Ť	he *Highest Nurr	ther Previously Pai	d For (Total	or Independen	nt) is the	n 3, enter "3." highest number	found in the	appropri	ate box	in colu	ımn 1.		